

CLEVELAND DIVISION OF POLICE

GENERAL POLICE ORDER



EFFECTIVE DATE:	CHAPTER:	PAGE:	NUMBER:
January 1, 2018	2 – Legal	1 of 3	2.01.02
SUBJECT:		l	
	DE-ESCALATION		
CHIEF:			
Office :	Calvin D. Williams, Chief		
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PURPOSE:

To establish guidelines for officers of the Cleveland Division of Police relative to deescalating situations in order to gain voluntary compliance and to reduce the need to use force.

POLICY:

Officers have the ability to impact the direction and outcome of the situation with their decision making and employed tactics. Policing, at times, requires that an officer may need to exercise control of a violent or resisting subject, or a subject experiencing a mental or behavioral crisis. At other times, policing may require an officer to serve as a mediator between parties, or defuse a tense situation. Officers shall use descalation tactics and strategies when safe under the totality of the circumstances and as time and circumstances permit.

DEFINITIONS: See General Police Order 2.01.01

PROCEDURES:

I. De-escalation Tactics and Techniques

- A. De-escalation tactics and techniques are proactive actions and approaches used by officers, when feasible, to gain the voluntary compliance of subject(s) and reduce or eliminate the need to use force.
- B. Officers shall avoid taking unnecessary actions that may escalate the need to use force, (e.g. aggressive body language, proximity, harsh level of voice and tone, officer's own stress level or excitement).
- C. When safe and feasible to do so, and before using force and/or to reduce the need for force, officers shall attempt to slow down the situation so that more time, options and resources are available for the incident to be resolved.
- D. Officers shall consider whether a subject's lack of compliance is a deliberate attempt to resist or an inability to comprehend and/or comply based on, but not limited to the following:
 - 1. The influence of drugs and/or alcohol;
 - 2. Known or reasonably apparent mental illness, developmental disability or crisis incident;
 - 3. Known or reasonably apparent physical disability or other medical or physical condition, including visual or hearing impairment;

PAGE:	SUBJECT:	NUMBER:
2 of 3	DE-ESCALATION	2.01.02

- 4. Limited English proficiency or other language barrier; and
- 5. Perceived age of a child.
- E. When deciding which tactical options are the most appropriate to bring the situation to a safe resolution, the officer's awareness of the above factors (Paragraph I. C.) shall be weighed in light of the facts of the incident and the totality of the circumstances facing the officer.
- F. De-escalation techniques shall be used, if feasible, once officers assess any threats present at the incident. The nature and immediacy of the threat will help determine what de-escalation or other tactics an officer may use to address the threat. In determining whether and what de-escalation techniques may be appropriate, officers should also:
 - 1. Determine whether the subject is in a mental health/behavioral crisis.
 - a. If the subject is in a mental health/behavioral crisis, officers shall call a Specialized CIT Officer to the scene. Specialized CIT officers who are dispatched to an incident involving an individual in crisis will have primary responsibility for the scene unless or until a supervisor arrives and assumes responsibility. (Refer to Crisis Intervention GPO 3.2.06).
 - b. If a supervisor has assumed responsibility for the scene involving a subject in a mental health/behavioral crisis, the supervisor will seek the input of a specialized CIT officer regarding strategies for resolving the crisis when it is reasonable for them to do so.
 - c. If the subject is not in a mental health/behavioral crisis, officers shall deescalate in accordance with this policy.
- G. De-escalation Techniques include:
 - 1. Proactive use of distance, cover, concealment, and time.
 - a. Separating oneself from the threat and create a safe distance to speak with subject(s). This allows officers to assess the situation and their options, bring additional resources to the scene, and develop a plan for resolving the incident without use of force;
 - b. Placing barriers between officers and an uncooperative subject;
 - c. Moving from a position that exposes officers to potential threats to a safer position;
 - d. Avoiding physical confrontation, unless immediately necessary (for example, to protect someone or to stop behavior that creates an imminent threat);

- e. Slowing down the pace of the incident, from the time officers receive the radio broadcast, and utilizing Division trained anxiety and stress management techniques when necessary;
- f. Allowing time and/or opportunity for a subject(s) to regain self-control or cease struggling or resisting, when their actions do not immediately threaten the safety of officers or others;
- g. Request additional personnel and wait, when safe and feasible to do so, for arrival of additional personnel.
- 2. Hearing and Listening Demonstrate officers are listening by interacting in conversation; people have a desire to be heard and understood.
- 3. Strategic communication or voice commands to de-escalate the situation
 - a. Verbalize to the subject(s), in a calm manner and normal tone of voice, all the options available to them, which officers can help with, and which would be best to end subject's crisis;
 - b. Ask questions rather than issue orders;
 - c. Advise the subject(s) of the actions that officers will take to end their crisis in the best way possible;
 - d. As a last resort, inform the subject that not following orders may result in the need to use force. When possible and appropriate, give subjects the opportunity to comply with directives.
- 4. Increase officer presence, if necessary, to increase strategic options available for bringing a subject under control and/or reduce the severity of the threat.
 - a. Request additional personnel respond to the scene/subject.
 - b. Where a subject appears to be experiencing a behavioral or mental health crisis, call a Specialized CIT Officer to the scene.
 - c. Request a supervisor.
- **II. Training -** Officers shall receive integrated, scenario based training at least yearly on deescalation techniques and tactical ways to handle situations where the use of force can be avoided or the level of force minimized.